DEPARTMENT OF CORRECTIONS SERVICES
Division of Juvenile Corrections
Services
3099 E Washington Ave
St
P O Box 8930
8916
Madison WI 53708-8930
Telephone: (608) 240-5000
FAX: (608) 240-3370

6836



DEPARTMENT OF HEALTH AND FAMILY

Division of Children and Family

1 W Wilson

P O Box

Madison WI 53708-8930 Telephone: (608) 267-3905 FAX: (608) 266-

State of Wisconsin

Jon E. LitscherScott McCallumPhyllis J. DubéSecretaryGovernorSecretary

Division of Children and Family Services Informational Memo 2002-16

Division of Juvenile Corrections Administrator's Memo Series for Counties # 02-12

To: Area Administrators/Assistant Area Administrators

Bureau Directors

County Departments of Community Programs Directors

County Departments of Developmental Disabilities Services Directors

County Departments of Human Services Directors County Departments of Social Services Directors

Licensing Chiefs/Section Chiefs

Tribal Chairpersons/Human Services Facilitators
Division of Juvenile Corrections Management Staff

Child Protective Services and Juvenile Justice Supervisors/Managers

Court Attached Juvenile Court Intake Workers

From: Susan N. Dreyfus

Administrator, DHFS, DCFS

Eurial K. Jordan

Administrator, DOC, DJC

Date: August 23, 2002

Re: LEGISLATIVE UPDATE TRAINING ON ACT 109 FOR SUPERVISORS

The Division of Children and Family Services and the Division of Juvenile Corrections will be conducting a series of regional training sessions on the recently enacted 2001 Wisconsin Act 109 (budget reform bill). Act 109 makes significant changes to Chapters 48 and 938 to reflect the requirements of the Adoption and Safe Families Act of 1997 and the final federal administrative rule.

The training sessions are intended for county child protective services and juvenile justice supervisors and managers. The objectives of the training are to: 1) provide an overview of the statutory changes; 2) review newly developed mandatory court forms; 3) address Title IV-E program requirements; and 4) identify implementation issues.

Listed below are the training dates and locations. Please complete the attached registration form and return it prior to the deadline indicated below. Early registration is suggested given that attendance is limited to approximately 40 people per site. There is no charge to attend this training, but participants will be responsible for their own lunch. All of the trainings are scheduled to begin at 10:00 AM and end by 3:30 PM.

TRAINING DATE	CITY	LOCATION	REGISTRATION DEADLINE
Friday September 6	Eau Claire	Western Riverside Building Eau Claire County Job Center 221 W. Madison St. (715) 836-3415	Tuesday September 3
Tuesday September 10	Wisconsin Dells	Rain Tree Resort & Conference Center 1435 Wisconsin Dells PKWY (608) 253-4386	Tuesday September 3
Wednesday September 11	Madison	Best Western East Towne Suites 4801 Annamark Dr. (608) 244-2020	Tuesday September 3
Monday September 16	Kimberly	Liberty Hall 800 Eisenhower Dr. (920) 731-0164	Monday September 9
Tuesday September 17	Rhinelander	Oneida County Law Center 2000 E. Winnebago St. (715) 361-5100	Monday September 9
Monday September 30	Waukesha	Sheraton Milwaukee Brookfield 375 S. Moorland Rd. (262) 364-1100	Monday September 23

REGIONAL OFFICE CONTACT: Area Administrator

CENTRAL OFFICE CONTACTS: Pamela J. Eitland

DOC, Juvenile Corrections

P.O. Box 8930 Madison, WI 53708 Phone: (608) 240-5914

E-Mail: pamela.eitland@doc.state.wi.us

Michelle Jensen DHFS/DCFS/BPP P.O. Box 8916

Madison, WI 53708-8916 Phone: (608) 261-8084

E-mail: jensemm@dhfs.state.wi.us

MEMO WEB SITE: http://www.dhfs.state.wi.us/partners.htm

Attachment

cc: Jon E. Litscher, Secretary, DOC

Cindy O'Donnell, Deputy Secretary, DOC Jessica O'Donnell, Executive Assistant, DOC Silvia Jackson, Deputy Administrator, DOC/DJC

County Foster Care Coordinators

Private Foster Care Agency Contact Persons

Kinship Care Contact Persons

Jay Sandstrom, Mendota Juvenile Treatment Center

County Youth Aids Contacts

REGISTRATION FORM

LEGISLATIVE UPDATE TRAINING ON ACT 109 FOR SUPERVISORS AND MANAGERS

(Please submit separate forms for each training site)

Name of Registrant(s)	\:				
1141110 01 11091011 411-1(0)	Name		Title		
	Name		Title		
	Name	Name Title			
County Agency:					
Address:					
City:					
Zip:					
Telephone:		FAX:			
	Training Loca	<u>tion</u>	Registration Deadline		
Check one:	Eau Claire	(September 6)	September 3, 2002		
	WI Dells	(September 10)	September 3, 2002		
	Madison	(September 11)	September 3, 2002		
	_ Kimberly	(September 16)	September 9, 2002		
		(September 17)	September 9, 2002		
	_ Waukesha	(September 30)	September 23, 2002		

Return form by deadline to: JoAnn Skaife

DHFS/DCFS/BPP

FAX: (608) 264-6750 Phone: (608) 266-9293

^{***}A confirmation notice and directions will be mailed prior to the training***